UNITED STATES DISTRICT COURT

			for the			
			District of			
			Division			
Plaintiff(s) (Write the full name of each plaintiff who is filing this If the names of all the plaintiffs cannot fit in the space please write "see attached" in the space and attach a page with the full list of names.) PTT OF TOWN OF TO			sued. If the bove, please			
		DEFENDANT (OR A CIVIL CASE ALLEGING THAT THE OWES PLAINTIFF A SUM OF MONEY J.S.C. § 1332; Diversity of Citizenship)			
	ana a	De die de Milite Clean Inited				
I.		Parties to This Complaint				
	A.	The Plaintiff(s)				
		Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.				
		Name	Sharan Strath M			
		Street Address	1083 Dagnes An 8			
		City and County	St Days			

B. The Defendant(s)

State and Zip Code Telephone Number E-mail Address

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

V.	Certification	n and	Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

For Parties Without an Attorney A.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:	\$/2003
Signature of Plaintiff Printed Name of Plaintiff	Snaven Statthin
For Attorneys	· · · · · · · · · · · · · · · · · · ·
Date of signing:	
Signature of Attorney	
Printed Name of Attorney	
Bar Number	
Name of Law Firm	
Street Address	
State and Zip Code	
Telephone Number	
E-mail Address	

Page 6 of 6 Reset

B.